

OCT 25 2006

**FAX TRANSMISSION**

DATE: October 25, 2006

PTO IDENTIFIER: Application Number 10/594,097  
Patent Number

Inventor: Ulrich Hersel et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: CONNOLLY BOVE LODGE &amp; HUTZ LLP

Aaron R. Ettelman

PHONE: (302) 658-9141

Attorney Dkt. #: 13907-00007-US

PAGES (Including Cover Sheet): 9

**CONTENTS:** Fee Transmittal (1 page)  
Transmittal of Combined Declaration and Power of Attorney (1 page)  
Combined Declaration and Power of Attorney (5 pages)  
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Certificate of Transmission (1 page)

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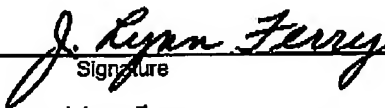
Application No. (if known): 10/594,097

Attorney Docket No.: 13907-00007-US

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PTO/SB/17 (07-06)


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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number 10/594,097 Filing Date September 25, 2006 First Named Inventor Ulrich Hersel Examiner Name Not Yet Assigned Art Unit N/A Attorney Docket No. 13907-00007-US	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 130.00			

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Note <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	
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<b>FEE CALCULATION</b> <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																																																	
	<b>FILING FEES</b> <table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> </tr> </tbody> </table>		Application Type	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	Design	200	100	Plant	200	100	Reissue	300	150	Provisional	200	100	<b>SEARCH FEES</b> <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>500</td> <td>250</td> </tr> <tr> <td>100</td> <td>50</td> </tr> <tr> <td>300</td> <td>150</td> </tr> <tr> <td>500</td> <td>250</td> </tr> <tr> <td>0</td> <td>0</td> </tr> </tbody> </table>		Fee (\$)	Small Entity Fee (\$)	500	250	100	50	300	150	500	250	0	0	<b>EXAMINATION FEES</b> <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>200</td> <td>100</td> </tr> <tr> <td>130</td> <td>65</td> </tr> <tr> <td>160</td> <td>80</td> </tr> <tr> <td>600</td> <td>300</td> </tr> <tr> <td>0</td> <td>0</td> </tr> </tbody> </table>		Fee (\$)	Small Entity Fee (\$)	200	100	130	65	160	80	600	300	0	0	<b>Fees Paid (\$)</b> _____
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<b>2. EXCESS CLAIM FEES</b> <b>Fee Description</b> Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180							<b>Small Entity Fee (\$)</b> _____																																										
<b>Total Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> _____ - 20 = _____ x _____ = _____ HP = highest number of total claims paid for, if greater than 20.							<b>Multiple Dependent Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> _____																																										
<b>Indep. Claims</b> <b>Extra Claims</b> <b>Fee (\$)</b> <b>Fee Paid (\$)</b> _____ - 3 = _____ x _____ = _____ HP = highest number of independent claims paid for, if greater than 3.																																																	
<b>3. APPLICATION SIZE FEE</b> If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>								Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	_____	_____	_____	_____	_____																																
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<b>4. OTHER FEE(S)</b> Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration 130.00							<b>Fees Paid (\$)</b> _____																																										

<b>SUBMITTED BY</b> Signature 		Registration No. 42,516 (Attorney/Agent)	Telephone (302) 658-9141
Name (Print/Type) Aaron R. Etteman		Date October 25, 2006	

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Application No.: 10/594,097

OCT 25 2006

Docket No.: 13907-00007-US

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Ulrich Hersel et al.

Application No.: 10/594,097

Confirmation No.: N/A

Filed: September 25, 2006

Art Unit: N/A

For: POLYMERIC PRODRUG WITH A SELF-  
IMMOLATIVE LINKER

Examiner: Not Yet Assigned

**TRANSMITTAL OF COMBINED DECLARATION AND POWER OF ATTORNEY**

MS PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits herewith the executed Combined Declaration and Power of Attorney in the above-captioned application. Applicant has not received a Notification of Missing Requirements.

Please charge our Deposit Account No. 03-2775 in the amount of \$130.00 covering the required fees..

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 13907-00007-US.

Dated: October 25, 2006

Respectfully submitted,

By 

Aaron R. Ettelman

Registration No.: 42,516  
CONNOLLY BOVE LODGE & HUTZ LLP  
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